WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Document Number Override 6TL0D0GSH8	Primary Crash Document#	Agency Crash Number 21-10514	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 11/01/2021	Crash Time 02:14 PM	Date Arrived 11/01/2021	Time Arrived 02:29 PM	
Date Notified 11/01/2021	Time Notified 02:16 PM	Total Units 02	Total Injured Total Kill	ed
	Hit and Run Lane Cl		Trailer or Towed	Reporting Threshold
Government Property	Active School Zone	School Bus Related	Tags	
Reportable	Crash Type DT4000 (STANDARD CRA	ASH)	Amended	Secondary Crash
Description				
Diagram			Reconstruction	on By
	E	OUTCH HOLLOW RD	, notes by	
			Additional Inf	ormation
Grassa sakatan Grassa	- U2			
[U2]]	E E			
		STOP		
		HEMLOCK PARK DRIVEWAY		
	4	Not drawn to scale		
	7			
I, a sworn law enforce	ment officer, agree that I have	e not added any CJIS data in t	his report.	
UNIT 1 WAS COMING OUT OF T	THE HEMLOCK PARK AREA WHEN I	DRIVER STATED HIS BRAKE PEDAL	WENT STRAIGHT TO THE FLOOF	
WASN'T GOING TO STOP. UNIT	1 WENT THROUGH THE INTERSEC	RD AND STATED SHE SAW UNIT 1 (CTION AND ENDED UP SWERVING L NIT 1 IN THE PASSENGER SIDE FRO	EFT TO TRY AND AVOID THE CF	
managa i nanga summani	DECOMB BOT WIN CHIEF THE BY OF	THE PROBLEM CIDE THO	111 /110 :	

UNIT 1 DRIVER LIED ABOUT HAVING INSURANCE AND WILL BE ADDING CITATION TO THE CRASH	

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Crash Date 11/01/2021

Crash Time 02:14 PM

Ĺ										
	_ocation ===									
	ON DUTCH HOLLOW RE 408 FT W)			Latitude 43.594414	4769		Longitud -90.137	de 7571634	
	OF THOMPSON RD IN THE TOWN OF LA VA IN SAUK COUNTY	LLE			X Coordinate 246734.34375		Y Coord 483161			
					Structure Type NO STRUCTURE					
(Crash Scene 💻									
T	First Harmful Event				FirstHarmf	ul Event l	Location			
	MOTOR VEH IN TRANSI	PORT			ON ROAD	WAY				
ľ	Manner of Collision				Light Condi	ition				
	01 - ANGLE		DAYLIGH	T						
Γ	Road Surface Condition(s)				Roadway F	actor(s)				
	DRY									
	Environment Factor(s)									
	NONE				NONE					
ſ	Weather Condition(s)									
	CLOUDY									
Animal Type					Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location		Crash Classification - Jurisdiction							
PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
	TribalLand			Access Control NO CONTROL			Special Study			
	Within Interchange Area NO	Junction Location INTERSECTION		Intersection T-INTERS	n Type SECTION					
ί	Jnit Summary =									
	Unit Status		Vehicle Op	erating As Cl	lassification		UnitType			
	IN TRANSIT		D CLASS				AUTOMO			
	Vehicle Type (SPORT) UTILITY VEHIC	CLE	·						s Endorsements	
	Total Occs	Train/Bus#Recorded	I	2 0		0 Speed Lir		1	:Mat Types	
L	2	Direction Of Travel						O Totali am		
	Insurance?	NORTHBOUND	Pre ✓					imit Total Lanes 2		
- 1	Most Harmful Event: Collision MOTOR VEH IN TRANSI						Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way TWO-WAY, NOT DIVIDE	D	Traffic Control					Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINO)	US)		Road Curvature STRAIGHT			Road Grade UPHILL			
	Truck Bus or HazMat									
	NO									
	NO Vehicle									
			Plate Type			St	Country of	ssuance		
	Vehicle		AUT - AL) JTOMOBIL	.E	WI	Country of UNITED S			
	Vehicle License Plate Number		AUT - AU		E '		1 -			
	Vehicle License Plate Number AJY7242 Vehicle Identification N		AUT - AU Make GENERA Body Style	JTOMOBIL	S COR	WI Year 1997	UNITED S			

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	Ш			Vehicle Damage		7 8 9 10 11			
IN	VEHICLE	Extent Of Damage MINOR DAMAGE		12 - FRONT		5 4 3 2 3			
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR					
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT							
		Driver Prior Action Other		BRAKES					
		Driver Actions FAILURE TO CONTROL							
UNIT	VEHICLE								
7	-10	Owner Name DANIEL TALON MCKENZE (719) 239-4561	E	Owner Address 1216 MAPLE ST REEDSBURG, WI	53959 , US				
		l Sequence Of Events							
	5	Event MOTOR VEH IN TRANSPO			шанананананананананананананананана				
	8	Event							
	8	Event							
	8	Event							
		Individual							
		Driver DANIEL TALON MCKENZI	=	Citations Issued					
	H	(719) 239-4561	E	2 Date of Birth	MALE Race				
—	3			WHITE					
TINO	INDIVIDUAL	Address 1216 MAPLE ST REEDSBURG, WI 53959 ,	us	Driver License Number STATE: COLORADO COUNTRY: UNITED STATES					
	Sa	On Duty Crash [ety Equipment		Safety Equipment					
		Row 01 - FRONT ROW	Seat Position	SHOULDER & LAP BELT					
		HeimetUse 07 - LEFT		Helmet Compliance					
		Eye Protection		TintCompliance					
5	8	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED					
		Ejected	Ejection Path		Trapped/Extricated				
		NOT EJECTED Medical Transport	NOT EJECTED/NOT API	PLICABLE EMS Agency Identifier	NOT TRAPPED EMS Run#				
		NOT TRANSPORTED		EWO Agency identified	EWO Kun#				
		Hospital		Date of Death	Time of Death				
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)								

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		Distracted By Action UNKNOWN								
		Striking Non Motorist	Unit#	Location						
		Prior Action								
		Action								
	J									
LIND	ã									
5	NDIVIDUA									
	=									
		Action Other						To/From School		
		Sugno	ted Alcohol t	leo	Suspected Drug Use					
	I	Drug & Alcohol No	764 VICO1901	U56	NO					
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type	<u> </u>		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Result	3			
2	100	Drug Type				<u> </u>				
		Individual Condition								
		Individual Condition								
		APPEARED NORMAL								
		Individual								
		Passenger LUCAS J TOURDOT			Citations Issued	Sex				
	UAL			<u>меньменьменьменьменьм</u>	Citations Issued	Sex MALE Race				
LN (MDUAL	LUCAS J TOURDOT		Maria de Maria de Maria de Maria	Citations Issued 0	Sex MALE Race WHITE				
TNU	INDIVIDUAL	LUCAŠ J TOURDOT (608) 415-2682	3965 , U S		Oitations Issued Date of Birth	Sex MALE Race WHITE				
TNU	INDIVIDUAL	LUCAS J TOURDOT (608) 415-2682 Address S1847 LARK RD WISCONSIN DELLS, WI 5			Oitations Issued Date of Birth Driver License Number STATE: WISCONSI	Sex MALE Race WHITE				
TNU		Address S1847 LARK RD WISCONSIN DELLS, WI 5			Oitations Issued Date of Birth Driver License Number STATE: WISCONSI	Sex MALE Race WHITE				
TNU		Address S1847 LARK RD WISCONSIN DELLS, WI 5		osition	Oitations Issued Date of Birth Driver License Number STATE: WISCONSI	Sex MALE Race WHITE				
TNU		Address S1847 LARK RD WISCONSIN DELLS, WI 5	y Crash Seat Po	osition	Oitations Issued Date of Birth Driver License Number STATE: WISCONSI	Sex MALE Race WHITE				
TNO		Address S1847 LARK RD WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW	y Crash Seat Po	osition	Oitations Issued Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP	Sex MALE Race WHITE				
	Saf	LUCAS J TOURDOT (608) 415-2682 Address \$1847 LARK RD WISCONSIN DELLS, WI 5 ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	y Crash Seat Pr 09 - R	osition IGHT	Citations Issued Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance	Sex MALE Race WHITE				
UNT UNT		LUCAS J TOURDOT (608) 415-2682 Address S1847 LARK RD WISCONSIN DELLS, WI 5 WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury S NO AP Ejected	Seat Pour 19 - R	osition IGHT NJURY ath	Citations Issued O Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE	TED STATES			
	Saf	LUCAS J TOURDOT (608) 415-2682 Address S1847 LARK RD WISCONSIN DELLS, WI 5 WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury S NO AP Ejected NOT EJECTED	Seat Pour 19 - R	osition IGHT NJURY	Citations Issued O Date of Birth Driver License Number STATE: WISCONSII Safety Equipment SHOULDER & LAP Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE	Trapped/Extricated			
	Saf	Address S1847 LARK RD WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Seat Pour 19 - R	osition IGHT NJURY ath	Citations Issued O Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier	Sex MALE Race WHITE	Trapped/Extricated NOT TRAPPED EMS Run#			
	Saf	Address S1847 LARK RD WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S Injury NO AP Ejected NOT EJECTED Medical Transport	Seat Pour 19 - R	osition IGHT NJURY ath	Citations Issued O Date of Birth Driver License Number STATE: WISCONSII Safety Equipment SHOULDER & LAP Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE	Trapped/Extricated			
	Saf	Address S1847 LARK RD WISCONSIN DELLS, WI 5 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Pour 19 - R	osition IGHT NJURY ath CTED/NOT APPL	Citations Issued O Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier	Sex MALE Race WHITE	Trapped/Extricated NOT TRAPPED EMS Run#			

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Crash Date 11/01/2021

		_									
		Non Motorist	Striking Unit#	Location							
		Prior Action		I							
	AL	Action									
LIND	INDIVIDUA										
		Action Other									To/From School
											10/F10111 SC11001
	L	Drug & Alcohol	Suspected Alco NO			Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty					Alcohol Test	Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	}		Drug T	Test Results	3		
10	005	Drug Type		•							
		Individual Condition									
		APPEARED NORM	1AL								
	1	Violations									
	10	UTC Number BG113641	Issue To? 001	Statute Number 344.62(1)		Description OPERATE MOTOR V	/EHICI	LE W/O IN	SURANCE		
	02	UTC Number BG113642	Issue To? 001	Statute Number 346.57(2)		Description FAILURE TO KEEP \	VEHIC	LE UNDE	R CONTROL		
	Unit	Summary •	•								
		Status RANSIT			Vehicle Operating As Classification D CLASS				Unit Type AUTOMOE	IILE	
05		cle Type DRT) UTILITY VEHI	CLE						Operating As	Endorsem	nents
	Tota 1	lOccs		#Recorded	Total#Citations Issued 0		Total Trailers 0			Total HazN 0	•
⊨	Insur YES	rance?	Direction (The state of the s	Pre CrashTire Mark		Speed Lin	nit	Total Lane: 2	5
LINO		:HarmfulEvent:Collisio				ecial Function O SPECIAL FUNCTION	N		NOT APPL	ICABLE	
	TWC	ic Way D-WAY, NOT DIVIDE	ED			affic Control CONTROL			Traffic Contr	·	ve/Missing
		ace Type .CKTOP (BITUMINC	DUS)			oad Curvature F RAIGHT			Road Grade LEVEL		
	Truc NO	k Bus or HazMat							•		
	1	Vehicle			ecece.		cecee	see en e	a a la	S S S S S S S S S S S S S S S S S S S	
		License Plate Number 947YXY	r			late Type UT - AUTOMOBILE		St WI	Country of Iss		
02	02	Vehicle Identification I 1GNDT13S832109			M	lake HEVROLET		Year 2003	Model TRAIL BLA		
		1GNDT13S832109396 Color DBL - BLUE, DARK		Body Style UT - SPORT UTILITY VEHICLE Bus Use							

6TL0DCL4G6

21-10514

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UNIT	VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNE Extent Of Damage	ER .	Vehicle Damage 01 - RIGHT FRONT FRONT, 12 - FRON	7 8 9 10 11 6 12 5 4 3 2 1			
_	۳	DISABLING DAMAGE Towed Due To Damage		Vehicle Removed By	1, 14 - ORDEROARE	102	5 4 3 2 1	
		TOWED DUE TO DISABLIN	NG DAMAGE	SHIELDS TOWING				
		What Driver Was Doing		Vehicle Factors				
		GOING STRAIGHT Driver Prior Action Other		NOT APPLICABLE				
LINI	VEHICLE	Driver Actions NO CONTRIBUTING ACTIO	N					
02	02	Owner Name MARGARET ERMA BUTLE (608) 464-7461	R	Owner Address E2404 CRANDA WONEWOC, WI				
		L Sequence Of Events						
	5	Event MOTOR VEH IN TRANSPO						
	62	Event						
	8	Event						
	8	Event						
_		Policy Holder						
INO		Insurance Company GRINNELL-MUTUAL-REIN		Individual MARGARET BUT			CHATTACH TANDET THE CANADA THE CA	
		Individual						
	_	Driver MARGARET ERMA BUTLE		Citations issued Sex 0 FEMALE				
⊨	IDINIDIN	(608) 464-7461		Date of Birth Race WHITE				
ş	훍	Address E2404 CRANDALL DRIVE		Driver License Number				
	Z	WONEWOC, WI 53968 , U	S	STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	On Duty Crash fety Equipment		Safety Equipment				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LA	IP BELT			
		HelmetUse		Helmet Compliance				
		Eye Protection		Tint Compliance				
05	800	Injury Sev Injury NO APP		Airbag NON DEPLOYED				
		Ejected	Ejection Path NOT EJECTED/NOT AP	PLICABLE		Frapped/Extricated		
		Medical Transport		EMS Agency Identif	ier I	EMS Run#		
		NOT TRANSPORTED		Data of Da -45		Firm and Fire and-		
		Hospital		Date of Death	Date of Death		Time of Death	

Crash Date 11/01/2021 Crash Time 02:14 PM

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		Distracted By Source NOT APPLICABLE	e E (NOT DISTRA	CTED)			
		Distracted By Action	.E (NOT DISTRAC				
		NOT DISTRACTED					
		Non Motorist Striking Unit#	Location				
		Prior Action	•				
		Action					
	4						
E	INDIVIDUAL						
UNIT							
	2						
		Action Other					To/From School
				_			
	1	Orug & Alcohol NO	Jse	Suspected Drug Use NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN	Drug Test Type		Drug Test Results		
		Drug Test Given TEST NOT GIVEN	Drug restrype		Ding restresum	•	
05	83	Drug Type	1				
)	0						
		Individual Condition					
		APPEARED NORMAL					